orm B1 (Official Form 1) - (Rev. 12/03) Main Documen		
UNITED STATES BANKRUPTCY COUR CENTRAL DISTRICT OF CALIFORNIA	VAIIINTARY PATITION	
Name of Debtor (if individual, enter Last, First, Middle):	Name of Joint Debtor (Spouse) (Last, First, Middle):	
Attorney's Internal Reference:		
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):	
Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (If more than one, state all):	Last four digits of Soc. Sec./Complete EIN orTax I.D. No. (If more than one, state all):	
Street Address of Debtor (No. & Street, City, State, & Zip Code):	Street Address of Joint Debtor (No. & Street, City, State, & Zip Code):	
County of Residence or of the Principal Place of Business:	County of Residence or of the Principal Place of Business:	
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):	
Location of Principal Assets of Business Debtor (if different from street address above):	Use Location of Principal Assets of Business Debtor as Filing Address	
Information Regarding the Debto	r (Check the Applicable Boxes)	
Venue (Check any applicable box)		
Debtor has been domiciled or has had a residence, principal place or preceding the date of this petition or for a longer part of such 180 day.  There is a bankruptcy case concerning debtor's affiliate, general part	•	
	oter 11 and the debtor acknowledges that a Venue Disclosure Form is	
Type of Debtor (Check all boxes that apply)	Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box)	
Individual(s) Railroad	the retition is riled (Check one box)	
Corporation Stockbroker	Chapter 7 Chapter 11 Chapter 13	
Partnership Commodity Broker	Chapter 9 Chapter 12	
Other Clearing Bank	Sec. 304 - Case ancillary to foreign proceeding	
Nature of Debts (Check one box)	Filing Fee (Check one box)	
Consumer/Non-Business Business	Full Filing Fee attached	
Chapter 11 Small Business (Check all boxes that apply)  Debtor is a small business as defined in 11 U.S.C. § 101  Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e). (Optional)	Filing Fee to be paid in installments (Applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form No. 3.	
Statistical/Administrative Information (Estimates only)	THIS SPACE FOR COURT USE ONLY	
Debtor estimates that funds will be available for distribution to unsect	ured creditors.	
Debtor estimates that, after any exempt property is excluded and adr paid, there will be no funds available for distribution to unsecured cre		
Estimated Number of Creditors		
1-15 16-49 50-99 100-199 200-999 1000 - over		
Estimated Assets		
\$0 - \$50,001- \$100,001- \$500,001- \$1,000,001- \$10,000,001- \$50,	000,001- More than 0 million \$100 million	
	000,001- More than 0 million \$100 million	
510 Ground Good, Goo of Filling 1 of Hillion Goo Hillion 510	o minion — proo minon	

	luntary Petition is page must be completed and filed in every case)	Name of Debtor(s):	FORM B1, Page 2	
Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheet)				
Loca Whe	ation re Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)				
Nam	e of Debtor:	Case Number:	Date Filed:	
Distr	ict:	Relationship:	Judge:	
Signatures for Electronically Filed Petitions				
	Signature(s) of Debtor(s) (Individual/Joint)	Exhibit A		
I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.		(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)  Exhibit A is attached and made a part of this petition.		
I request relief in accordance with the chapter of title 11, United States		Exhibit B		
X	Signature of Debtor	(To be completed if debtor is an indiviconsumer debts) I, the attorney for the petition, declare that I have informed the proceed under chapter 7, 11, 12, or 13 and have explained the relief available	etitioner named in the foregoing e petitioner that [he or she] may of title 11, United States Code,	
	Signature of Joint Debtor	Signature of Attorney for Debtor(s)	 Date	
	Telephone Number (If not represented by attorney)	Exhibit	С	
		Does the debtor own or have possession	on of any property that pages or	
	Date	is alleged to pose a threat of imminent health or safety?		
×	Signature of Attorney	is alleged to pose a threat of imminent	and identifiable harm to public	
X		is alleged to pose a threat of imminent health or safety?	and identifiable harm to public	
X	Signature of Attorney	is alleged to pose a threat of imminent health or safety?  Yes, and Exhibit C is attached and No  Signature of Non-Attorn	and identifiable harm to public made a part of this petition.	
X	Signature of Attorney Signature of Attorney for Debtor(s)	is alleged to pose a threat of imminent health or safety?  Yes, and Exhibit C is attached and  No	and identifiable harm to public made a part of this petition.  They Petition Preparer preparer as defined in 11 U.S.C. or compensation, and that I have	
X	Signature of Attorney  Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)	is alleged to pose a threat of imminent health or safety? Yes, and Exhibit C is attached and No  Signature of Non-Attorn I certify that I am a bankruptcy petition p § 110, that I prepared this document for	made a part of this petition.  They Petition Preparer  Dreparer as defined in 11 U.S.C.  Tr compensation, and that I have document.	
X	Signature of Attorney  Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)  Firm Name	is alleged to pose a threat of imminent health or safety? Yes, and Exhibit C is attached and No  Signature of Non-Attorn I certify that I am a bankruptcy petition p § 110, that I prepared this document for provided the debtor with a copy of this	made a part of this petition.  They Petition Preparer  Dreparer as defined in 11 U.S.C.  Treparer compensation, and that I have document.	
X	Signature of Attorney  Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)  Firm Name  Address  Telephone Number  Fax Number	is alleged to pose a threat of imminent health or safety?  Yes, and Exhibit C is attached and No  Signature of Non-Attorn I certify that I am a bankruptcy petition period the debtor with a copy of this  Printed Name of Bankruptcy Petition Period Name of Name	made a part of this petition.  They Petition Preparer  Dreparer as defined in 11 U.S.C.  Treparer compensation, and that I have document.	
X	Signature of Attorney  Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)  Firm Name  Address	is alleged to pose a threat of imminent health or safety? Yes, and Exhibit C is attached and No  Signature of Non-Attorn I certify that I am a bankruptcy petition ps 110, that I prepared this document for provided the debtor with a copy of this  Printed Name of Bankruptcy Petition Proceedings of the Complete Social Security Number (Recomplete Security Number (Reco	made a part of this petition.  They Petition Preparer  Dreparer as defined in 11 U.S.C.  Treparer and that I have document.  Treparer  Treparer  Treparer  Treparer	
I de petii	Signature of Attorney  Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)  Firm Name  Address  Telephone Number  Bar Number	is alleged to pose a threat of imminent health or safety? Yes, and Exhibit C is attached and No  Signature of Non-Attorn I certify that I am a bankruptcy petition ps 110, that I prepared this document for provided the debtor with a copy of this  Printed Name of Bankruptcy Petition Proceedings of the Complete Social Security Number (Recondant Complete Social Security	made a part of this petition.  They Petition Preparer  Dreparer as defined in 11 U.S.C. or compensation, and that I have document.  Treparer  Quired by 11 U.S.C§ 110,(c).)  Ty numbers of all other preparing this document:  It is document, attach additional	
I de petii petii The	Signature of Attorney  Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)  Firm Name  Address  Telephone Number  Bar Number  Signature of Debtor (Corporation/Partnership)  clare under penalty of perjury that the information provided in this tion is true and correct, and that I have been authorized to file this	is alleged to pose a threat of imminent health or safety?  Yes, and Exhibit C is attached and No  Signature of Non-Attorn I certify that I am a bankruptcy petition perovided the debtor with a copy of this Printed Name of Bankruptcy Petition Perovided Social Security Number (Red Address  Names and complete Social Security individuals who prepared or assisted in If more than one person prepared the	reparer  quired by 11 U.S.C§ 110,(c).)  y numbers of all other preparing this document:  is document, attach additional fficial form for each person.	
I de petii petii The Stat	Signature of Attorney  Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)  Firm Name  Address  Telephone Number  Bar Number  Signature of Debtor (Corporation/Partnership)  clare under penalty of perjury that the information provided in this tion is true and correct, and that I have been authorized to file this tion on behalf of the debtor.  debtor requests relief in accordance with the chapter of title 11, United	is alleged to pose a threat of imminent health or safety?  Yes, and Exhibit C is attached and No  Signature of Non-Attorn I certify that I am a bankruptcy petition provided the debtor with a copy of this  Printed Name of Bankruptcy Petition Provided the Social Security Number (Red Address  Names and complete Social Securitindividuals who prepared or assisted in If more than one person prepared the sheets conforming to the appropriate of X  Signature of Bankruptcy Petition Provided the Social Security Number (Red Address)	reparer  quired by 11 U.S.C§ 110,(c).)  y numbers of all other preparing this document:  is document, attach additional fficial form for each person.	
I de petii petii The Stat	Signature of Attorney  Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)  Firm Name  Address  Telephone Number  Bar Number  Signature of Debtor (Corporation/Partnership)  clare under penalty of perjury that the information provided in this tion is true and correct, and that I have been authorized to file this tion on behalf of the debtor.  debtor requests relief in accordance with the chapter of title 11, United es Code, specified in this petition.	is alleged to pose a threat of imminent health or safety?  Yes, and Exhibit C is attached and No  Signature of Non-Attorn I certify that I am a bankruptcy petition perovided the debtor with a copy of this Printed Name of Bankruptcy Petition Perovided Social Security Number (Red Address  Names and complete Social Security individuals who prepared or assisted in If more than one person prepared the sheets conforming to the appropriate of X  Signature of Bankruptcy Petition Pred Date  A bankruptcy petition preparer's failure	rand identifiable harm to public a made a part of this petition.  They Petition Preparer  Dreparer as defined in 11 U.S.C. or compensation, and that I have document.  Treparer  Quired by 11 U.S.C§ 110,(c).)  Ty numbers of all other or preparing this document:  It document, attach additional exparer  The preparer of the person.  The preparer of the person of the pe	
I de petii petii The Stat	Signature of Attorney  Signature of Attorney for Debtor(s)  Printed Name of Attorney for Debtor(s)  Firm Name  Address  Telephone Number  Bar Number  Signature of Debtor (Corporation/Partnership)  In the stion is true and correct, and that I have been authorized to file this tion on behalf of the debtor.  In the debtor requests relief in accordance with the chapter of title 11, United the seconds, specified in this petition.  Signature of Authorized Individual	is alleged to pose a threat of imminent health or safety?  Yes, and Exhibit C is attached and No  Signature of Non-Attorn I certify that I am a bankruptcy petition perovided the debtor with a copy of this Printed Name of Bankruptcy Petition Perovided Social Security Number (Reconstruction of Address  Names and complete Social Security individuals who prepared or assisted in If more than one person prepared the sheets conforming to the appropriate of Signature of Bankruptcy Petition President Signature Signature of Bankruptcy Petition President Signature Signatur	made a part of this petition.  They Petition Preparer  Dreparer as defined in 11 U.S.C.  Treparer  Dreparer  Drepare	

## Case 2:05-bk-13823-VK Doc 1-1 Filed 02/28/05 Entered 02/28/05 00:00:00

## Main Document Page 3 of 3 UNITED STATES BANKRUPTCY COURT

Central District of California

## ELECTRONIC FILING DECLARATION OF DEBTOR(S)

I (We), the undersigned Debtor(s), hereby declare under penalty of perjury that: (1) I have read and understand the petition, schedules, statements, and, if filing under chapter 13, the plan, being filed electronically; (2) the information provided in the petition, schedules, statements, and, if filing under chapter 13, the plan, being filed electronically, including my full Social Security Number as electronically submitted to the Court, is true, correct and complete; (3) the "/s/," followed by my name, on the signature line(s) for the Debtor(s) in the electronically filed petition, schedules, statements, and, if filing under chapter 13, the plan, serves as my signature and denotes the making of such declarations, requests, statements, verifications and certifications to the same extent and effect as my actual signature on such signature line(s); (4) I have actually signed a true and correct hard copy of the electronically filed petition, schedules, statements, and, if filing under chapter 13, the plan, in such places and provided the executed hard copy of the petition, schedules and statements to my attorney; (5) I have completed and signed a Statement of Social Security Number(s) (Form B21) and provided the executed original to my attorney; and (6) I have authorized my attorney to file the electronic version of the petition. schedules, statements, and, if filing under chapter 13, the plan, and this Declaration with the United States Bay

Court for the Central District of California.	the plan, and this beclaration with the officed states bankrupicy
Les Terell 5	2-28-5
Signature of Debtor	Date
Leo Terrell, Jr	
Printed Name of Debtor	
ELECTRONIC FILING DECLAR	ATION OF ATTORNEY FOR DEBTOR(S)
I, the undersigned Attorney for the Debtor(s), he	ereby declare under penalty of perjury that: (1) the "/s/," followed by

my name, on the signature lines for the Attorney for Debtor(s) in the electronically filed petition, schedules, statements. and, if filing under chapter 13, the plan, serves as my signature and denotes the making of such declarations, requests, statements, verifications and certifications to the same extent and effect as my actual signature on such signature lines; (2) the Debtor(s) signed the Declaration of Debtor(s) and completed and signed the Statement of Social Security Number(s) (Form B21) before I electronically submitted the petition, schedules, statements, and, if filing under chapter 13, the plan, for filing with the United States Bankruptcy Court for the Central District of California; (3) I have actually signed a true and correct hard copy of the electronically filed petition, schedules, statements, and, if filing under chapter 13, the plan, in the locations that are indicated by "/s/," followed by my name, and have obtained the signature(s) of the Debtor(s) in the locations that are indicated by "/s/," followed by the Debtor's name, on the true and correct hard copy of the petition, schedules, statements, and, if filing under chapter 13, the plan, (4) I shall maintain the executed originals of this Declaration, the Declaration of Debtor(s), the Statement of Social Security Number(s) (Form B21), the petition, schedules, statements, and, if filing under chapter 13, the plan, for a period of five years after the closing of the case in which they are filed: (5) I shall make the executed originals of this Declaration, the Declaration of Debtor(s), the petition, schedules, statements, and, if filing under chapter 13, the plan, available for review upon request of the Court or other parties; and (6) I shall make the executed original of the Statement of Social Security Number(s) (Form B21) available for review upon

request of the Court. Signature of Attorney for Debtor(s) Sunita N. Sood Printed Name of Attorney for Debtor(s)

If you are manually filing this Declaration form at the Intake window to cure the deficiency regarding the attorney's signature,

please indicate the case number here: